PTO/S8/06 (08-03)
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Character of the second Act of 1995, he persons are required to respond to a considerent information unless it deploys a valid OMB control number.											
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Dockel Mumber 10708799		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
L	FOR	NUM	NUMBER FILED		NUMBER EXTRA		RATE	FEE	1	RATE	676
[6	SIC FEE FOFR 1.16(a))						- 15,112	,	OR.	- M.E	,770
	TAL CLAIMS CFR 1.16(c))	34	minus		14	1	x s •		OR	x : 18.	
()	DEPENDENT CLA	ens 4	minus	,	1	1	X \$ =		***	x :86 =	253
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1			OR	X SOD :	86
							+\$		OR	L+3	
" if the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL		OR	TOTAL	8011
CLAIMS AS AMENDED - PART II											
L	·	(Column 1)		(Column 2)	(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	R THAN ENTITY
Ā	11/2/2	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	П	RATE	ADDI-		RATE	ADD1
EN.	12/05	AFTER AMENOMENT		PREVIOUSL' PAID FOR	YEXTRA			TIONAL FEE			TIONAL FEE
AMENDMENT A	Total (27 CFR 1.18(CB	34	Minus	" 34	-		x 3 =		OR	x s	
AFIN	Independent (IF CFR 1.15(b))	. 4	Minus	" 4	• —		x \$		08	xs •	
¥	FIRST PRESENT	TATION OF MULTIPL	E DEPENC	ENT CLAIM (37	CFR 1.16(d))		+s •		OR	+: .	
						•	TOTAL ADD'L FEE	1/	• • •	TOTAL	₩
		(Column 1)					ADDLIFEE [OR	ADDIFEE	
~	Γ.	CLAIMS		(Column 2) HIGHEST		•				· · · · · · · · · · · · · · · · · · ·	
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MENDMENTB	(ST CFR 1.18(d) Independent	34	Minus	34	╂╌┤	ŀ	× s	+	OR .	× \$•	}
AME	(D) CHR 1.15(D)	<u> </u>	<u> </u>	.4	1	ŀ	× 5		OR	x s	\
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.19(4))						L	+5 2	1	OR	+ 5	
·							TOTAL ADD' FEE		OR	ADD'L FEE	
		(Cotume 1) .		(Cotumn 2)	(Calumn 3)						
ပ		CLAIMS . REMAINING		HIGHEST NUMBER	PRESENT	ſ	RATE	AODI	ſ	RATE	ADDI-
Z		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	L	1	TIONAL FEE			TIONAL FEE
S	Total (37 CFR 1,1862)		Minus	•	2	Γ	x \$		OR	x \$	
AMENDMENT	(SP CFR 1,16(b))		Minus	***	2	Γ	x s			x s =	
₹	FIRST PRESENTA	ATION OF MULTIPLE	DEPEND	ENT CLAIM (37 C	FR 1.16(d)	T	+; .		OR		
			-		_	TOTAL ADD'L FEE			TOTAL		
If the Britis in column 1 is less than the entry in column 2 write '11' in column 1											
" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".											

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